TOWN OF AVON FIELDS ADVERTISING APPLICATION

REQUIRED INFORMATION Deadline: March 1, 2017

Buckingham Recreation Area Baseball field

Business Name:				
Contact Name:				
Address:				
Phone:	Email:			
	submit along with the follon, CT 06001 for approval	_	on Recreation and	Parks Department, 60 West Main
• • •	on fee (non-refundable) color rendering (proof) of	the advertis	ing sign from the s	sign company creating and making
• • • • • •	erstand and agree to the te must be received by the F			etic Fields Advertising policies and ent by March 31, 2017.
Please indicate the le	ngth of Sponsorship Term	desired:		
1 Season () \$800			5 Seasons ()	\$3,000
2 Seasons () \$1,50	0			
Payment Method:				
Check Number (Payab	ole to Town of Avon Collect	tor of Reveni	ue):	
OR				
Credit Card Type (Visa	, MC, Amex or Discover):			
Number:		Exp. Date:_		Security Code:
Signed:			_	
Print Name:			_	
Office Use Only:				
Application and \$25 F	ee Received:		Sponsorship Paym	ent Received: